



Bib Data Sheet

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<b>SERIAL NUMBER</b> 09/505,209	<b>FILING DATE</b> 02/16/2000 <b>RULE</b> -	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1646	<b>ATTORNEY DOCKET NO.</b> 2265-11-1
<b>APPLICANTS</b> Brent Atkinson, Lakewood, CO; James J. Benedict, Arvada, CO; <i>CIP of 09/250,370 2/16/99, allowed.</i> <i>which is a CIP of PCT/EP98/05100 8/12/98</i>				
<b>** CONTINUING DATA *****</b> <i>Amg</i>				
<b>** FOREIGN APPLICATIONS *****</b> <i>EP9</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> - <b>** 04/26/2000</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and <i>Amg</i> Acknowledged Examiner's Signature Initials		<b>STATE OR COUNTRY</b> CO	<b>SHEETS DRAWING</b> 8	<b>TOTAL CLAIMS</b> 72
				<b>INDEPENDENT CLAIMS</b> 7
<b>ADDRESS</b> Gary J. Connell SHERIDAN ROSS P.C. 1560 Broadway, Suite 1200 Denver ,CO 80202-5141				
<b>TITLE</b> <i>Compositions</i> Device and method for regeneration and repair of cartilage lesions				
<b>FILING FEE RECEIVED</b> 2454	<b>FEES:</b> Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	

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